

# DES MOINES YOUTH COUNCIL

## APPLICATION



We want you! The **Des Moines Youth Council** invites middle and high school students looking to develop leadership skills and participate in their community. As a member, you will attend regular monthly meetings, volunteer at local events, and come up with creative new ways to serve in your community.

### Previous projects include:

- Serve and lead crafts at Breakfast w/Santa
- Argosy Christmas Ship Bon Fires
- Face painting and egg supervision at Spring Egg Hunt
- Earth Day Projects
- Field House Dances
- **Meet new people**
- **Earn volunteer service hours**
- **Be a leader in the community**



## 2016

Our meetings are held on the following dates at 2:50 pm at Pacific Middle school.

1/7	3/24
1/14	3/31
1/21	4/14
1/28	4/21
2/4	4/28
2/11	5/5
2/18	5/12
2/25	5/19
3/3	5/26
3/10	6/4
3/17	

Please complete the application on the reverse side and return to the Field House office.

Attn: Julia Cain, Recreation Specialist  
Des Moines Youth Council  
1000 S. 220<sup>th</sup> Street 98198  
206-870-6582

In consideration for the privilege to distribute the attached materials, the Highline School District shall be held harmless from any cause of action, claim or petition filed in any court or administrative tribunal arising out of the distribution of these materials, including all costs, attorney's fees, and judgments or awards.

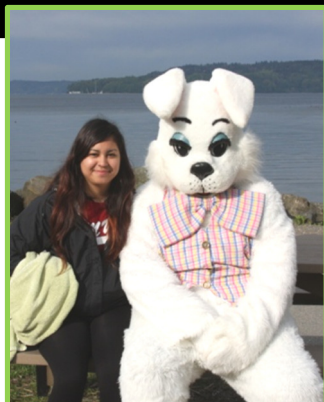


[www.desmoineswa.gov](http://www.desmoineswa.gov)

DES MOINES PARKS, RECREATION, & SENIOR SERVICES

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Name		Phone Number	
Address			
City	State	Zip	
School	Grade	Birth date (mm/dd/yyyy)	
If selected, will you honor the time commitment required for service? Yes No			
As a teen in Des Moines, what concerns you?			
Tell us about experiences you have had while working on issues concerning youth?			
Tell us about your volunteer experience, honors, awards, hobbies, etc.			
What can you contribute to the Des Moines Youth Council?			
Youth Signature		Date	
Parent Signature		Date	

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### NOTICE TO VOLUNTEERS

Volunteers are not considered to be City of Des Moines Employees. Injury Compensation is provided through Department of Labor and Industries. Volunteer service is considered to be creditable work experience. The data furnished on this form is furnished voluntarily and will be used to contact, interview and place volunteers.

### **SIGNATURE IS REQUIRED**

To the best of my knowledge, the information herein is true and complete. I understand that falsification of this application is grounds for dismissal as a volunteer. Further, I give permission for an authorized representative of the city to conduct a state patrol criminal background check in accordance with RCW 43.43.830-839 and to inquire of individuals about my ability to perform all aspects of the volunteer position for which I am being considered and I release the City of Des Moines and those individuals/institutions that provide information from any liability that may arise from the provision of this information.

As a volunteer for the City of Des Moines, I am fully aware that the work associated with being a City Volunteer involves certain risks of physical injury or death. Being fully informed as to these risks and in consideration of my being allowed to participate in the City's Volunteer Program, I hereby assume all risk of injury, damage, and harm to myself arising from such activities or use of City facilities. I also hereby individually and on behalf of the City of Des Moines, its officials, employees and agents waive any right of recovery that I might have to bring a claim or lawsuit against them for personal injury, death, or other consequences occurring to me arising out of my volunteer activities.

I give permission to have my photograph taken and used for publicity purposes by the City. I authorize any necessary emergency medical treatment that might be required for me in the event of physical injury and/or accident to me while participating in this program.

**TRANSPORTATION:** The City of Des Moines Parks, Recreation & Sr. Services Department staff has my permission to transport \_\_\_\_\_ to and from any Des Moines Youth Council activity.  
(Child's Name)

I understand transportation to and from meetings and local events is available on a limited basis, and that rides to and from local meetings and events must be pre-arranged with the Des Moines Parks & Recreation Department at (206) 870-6527. I also understand that transportation is primarily reserved for field trips and out of town service events.

Youth Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_